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ABSTRACT

A case study used focus groups to examine employee attitudes and concerns. Subjects, about 60 employees and managers of a major university teaching hospital in the southeast, were formed into 4 focus groups to discuss their attitudes. Employees hoped that management would use the information gathered to improve the communication environment and morale. There was general agreement as to the uniqueness of working at a teaching hospital, but frustration caused by the sheer volume of work and ceilings placed on salaries at such a hospital. Results from the employees were summarized using the following categories: opportunity for achievement, recognition, the work itself, responsibility, opportunities for advancement, growth, company policies and procedures, supervision, working conditions, relationship with peers, and communication. Results also indicated that managers were more intense concerning the issues they raised than were the other employees; felt strongly about their mission to provide good patient care; and were concerned with lack of communication with the administration of the hospital. (RS)

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Focus Groups as a Method for
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A Case Study
for an Employee Attitude Survey

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Focus Groups as a Method for
Conducting a Needs Analysis:
A Case Study

Focus groups which saw their beginning in a research methodology called the focused interview date back to 1941 (Merton, 1946). Oddly, this research technique, which grew out of research in mass communication, has been largely neglected by scholars in communication. Focus groups have been heavily used in marketing research, for many types of consumer research and to gain response to advertising campaigns.

As communication researchers have become interested in various qualitative research techniques, focus groups have merged as an obvious alternative research method in communication (Byers, 1988).

Communication research has received criticism by critics who believe that much of the research in the field has strayed too far from the process of communication. Communication scholars have only recently begun to advocate possibilities in qualitative research as one means of providing solid "grounded theory" (Byers, 1991).

As originally described by Merton, the focused interview had four uses: (1) specifying the effective stimulus, (2) interpreting discrepancies between anticipated and actual effects, (3) interpreting discrepancies between prevailing effects and effects among sub-groups, and (4) interpreting processes involved in experimentally induced effects (1956, p. 6). These uses would justify the attention of communication researchers to focus groups as a type of qualitative research.

Merton went on to discuss the role of the interviewer and the criteria of the focused interview. He described the four criteria as inter-related:

- (1) Range. The interview should enable interviewees to maximize the reported range of evocative elements and patterns in the stimulus situation as well as the range of responses.
- (2) Specificity. The interview should elicit highly specific reports of the aspects of the stimulus situation to which interviewees have responded.
- (3) Depth. The interview should help interviewees to describe the affective, cognitive and evaluative meanings of the situation and the degree of their involvement in it.
- (4) Personal Contact. The interview should bring out the attributes and prior experience of interviewees which endow the situation with these distinctive meanings (1956, p. 12).

As the focused interview has evolved into focus groups, the criteria originally described by Merton remains important. Merton concedes that research now being conducted in focus groups "has an amiable congruence" with the original focussed (sic) interview (1987).

The Focus Group

The focus group is a discussion group typically consisting of eight to twelve participants. The group is led by a trained facilitator to discuss one topic or issue in depth. Discussion builds from the general to the more specific--gradually focussing, so to speak, on the main concept or concern. Like all other research, focus groups have both advantages and disadvantages. One advantage is the release of inhibition by the participants. The interviewer will usually call for a full

and open discussion of the issues and interviewees will usually respond with frank opinions on the issue at hand. A second advantage of the focus group is that individuals in the group will possess a wide range of information on the subject. Responses from individuals in the group will often stimulate others to recall often forgotten details about the topic. This situation will allow respondents to expand on their own views, encouraging participants to react and build on others' ideas. A third advantage of focus group research is that it is a valuable source for exploratory information when little is known beforehand about the research topic (Byers, 1988).

Several disadvantages are also present in focus group research. One disadvantage is that outspoken members will sometimes dominate the group. Also, at times interviewees will introduce an unrelated matter to the discussion. A second disadvantage relates to what some authorities cite as social desirability or the tendency for respondents to report only information which they feel is socially desirable or acceptable. A third disadvantage is biased results caused from participants who tend to be more outgoing and extroverted (Byers, 1988).

Focus groups have several applications for research in applied communication. They may be used as the first phase in a communication audit; or to verify results of a communication audit, they may be used to quickly get at consumer or employee attitudes on a variety of issues. In the case study reported

here focus groups have been used to gather information concerning employee attitude.

METHODOLOGY

Data for this report was gathered from four focus groups (approximately sixty employees and managers) on July 28-29, 1989, at a major university teaching hospital in the Southeast. Participants were selected at random for the study. Focus groups allow certain advantages over surveys for data collection. While the focus groups are time consuming and are subject to error because of personal idiosyncrasies, the response rate is higher because employees are less likely to refuse to respond in a face-to-face communication as opposed to being asked to write a response on a form. Interviews are good tools for revealing feelings or causes of and possible solutions to problems which employees of the division identify. Focus groups provide maximum opportunity for employees to represent themselves spontaneously on their own terms.

Communication in a focus group setting allows for the discussion to begin with a high degree of uncertainty, a very desirable situation for allowing participants to provide a wealth of information. When data are generated solely from the group, the key problem areas are identified through group consensus. This method of data collection can produce rich data that has validity for the group, since the group created

the data in the first place. Utilizing focus group interview methods in which employees are interviewed in homogenous groups is recognized as a method of obtaining valuable information in an atmosphere where the researcher can experience organizational interactions first hand.

It is important to note at the outset of this report that every employee selected for participation in this study was cooperative and indicated an interest in providing any information at his/her disposal to assist the hospital. Many employees expressed a hope that management would use the information from this research to improve the communication environment where they work. Many also indicated a concern with the morale and pointed to examples of changes which appear to have contributed to this perceived low morale. Employees with long tenure, many dating to the days of the old municipal hospital which predated the current hospital, told how changes have occurred and how morale has sagged as time has passed.

THE ATTITUDE SURVEY

In each session, specific lines of questioning were pursued relating to areas of satisfaction and dissatisfaction. As might be expected in a research project of this type, participants were more eager to discuss areas of concern than areas of satisfaction. The material which follows is organized according to the outline developed by Frederick Herzberg in his work on employee motivation. It was interesting in this

hospital setting how closely the employee concerns paralleled the model developed by Herzberg.

In his discussion of factors leading to extreme job satisfaction, Herzberg lists achievement, recognition, work itself, responsibility, advancement and growth.

Achievement. For the professional employees there is frustration about the opportunity for achievement at this hospital. While there was fairly general agreement that this is an exciting place to work because of its uniqueness and because it is a teaching hospital, there was frustration because of the perceived roadblocks caused by the sheer volume of work and by the ceiling placed on salary.

Among the nursing staff there was a general feeling that "We are a stepchild,...everything is dumped on nursing." There was a feeling that management is not concerned with their problems and nurses often feel caught in the middle between the hospital and its restrictions on the one hand and the demands of doctors on the other.

Recognition. Among the employees in this research, there was almost a unanimous feeling that recognition is non-existent at the hospital. While there were isolated examples of different forms of recognition, there was a general feeling that "no one appreciates the work we do." A desire was expressed for a more "humanitarian" approach to employees and the suggestion was made that supervisors "should talk more humanely to employees." There was mention that recognition programs for retiring employees have been eliminated.

Among the nursing staff there was a concern that RN's don't get recognition for their own professional advancements.

Work Itself. Of the items leading to job satisfaction, this one would probably score the highest among these employees. When asked what kept them from leaving this hospital, employees in most groups indicated the fact that they could work with an interesting variety of patients. These employees also indicated that work here provides an opportunity for employees to learn a lot. Most employees indicated that one of the main appeals for them is the fact that they like their fellow employees.

There was some concern that hospital expectations of the quantity of work are unrealistic. In fact, when asked if you had to choose between more pay for yourself or more help, there was almost unanimous siding for more help.

Among these employees there was a concern that there has been a move for some time for the hospital to want more output from employees for less money. Some expressed resentment that they are told, not asked, to produce more work.

Responsibility. Except for some concerns raised among the nursing staff regarding the variety of tasks for which they were responsible, there was not an undue concern about too little or too much responsibility. In general, nurses felt that they must perform many non-nursing activities which in the past and in other hospitals are performed by orderlies, nurses' aides, etc.

Advancement. There was fairly unanimous agreement that not all employees are interested in advancing in the organization, but there was a general feeling that job openings are not filled fairly and that there is a bias in promotions.

Among the nursing staff there was a concern that the hospital does not have a career ladder. There was also a concern among some nurses that seniority should be weighed more heavily in some of the assignments.

Growth. While not all employees are interested in job advancement, almost all want the opportunity to grow in their jobs. This fact was pointed out very clearly among employees in this survey.

In general, the nursing staff was satisfied with the in-house continuing education opportunities. They felt that courses offered by management were good at the basic level but should have more variety and more advanced courses.

Nurses gave several examples of attending professional development seminars and being the only nurses at the seminar to completely pay their own way.

Among the non-nursing staff, there was a desire among most employees to have access to opportunities for self-development. For example, several mentioned an interest in learning some basic computer and word processing skills.

The above items relate to job satisfaction if they are not met. Herzberg suggests that the following items can relate to extreme dissatisfaction: company policies and procedures, supervision, work conditions, salary and relationship with peers.

Company Policies and Procedures. Several policies and procedures were of concern to employees in this survey. Perhaps chief among the concerns was the matter of the hospital itself. There was a concern among the employees that the teaching staff is anti-organization, often causing the hospital employee to get caught in an unpleasant situation. There was also some concern that the hospital is only interested in "the bottom line" and that meeting the budget takes priority over patient care. A concern existed about the perceived poor reputation of this hospital among its peers in the city.

On a different level, inadequate supplies were a problem for many employees.

Several participants expressed a perception that physicians expect a different level of treatment for insurance patients and for indigent patients.

Supervision. It should be emphasized here that several participants praised their supervisors and had no direct complaints in this regard. However, several insightful points were made relative to the total climate at the hospital. There was a concern that supervisors will often fail to reprimand a subordinate for fear of losing the employee who in turn would not be replaced. Concerns were voiced that "supervisors take all the credit" and that often they play favorites.

One issue that somewhat related to supervision and somewhat related to policies was that of conflicting lines of authority. Employees felt frustrated when given conflicting instructions by those above them.

A very real concern was expressed by employees that reflected somewhat on the supervisors. That concern related to a feeling that no one listens to me. Some did express feeling that supervisors are so busy that they don't have time to listen.

Related to the matter of listening was a frustration about the lack of opportunity for upward communication and even if one listened to you, ideas don't go beyond the "boss."

Employees, in general, sympathized with the position of department heads and supervisors feeling that those individuals may not have access to enough information to interpret that information for their employees.

Work Conditions. Some concerns about physical conditions were expressed. These concerns related to a failure of the building to be cleaned regularly. There was also a feeling by some that more equipment is needed for better patient care.

Another problem expressed by most employees was that of "maxing out," that is, the hospital had a salary ceiling. Employees felt that this policy removed incentives for them to try to be more productive.

Most participants indicated a feeling that morale was very low among employees and that, in general, there is a lack of employee commitment, "they are committed to the patients, but not to the hospital."

Issues that related to morale were items such as "budget days," the time clock, (employees don't understand the time system) the removal of benefits, changes in vacation benefits,

the patient transportation system, lack of adequate lounge facilities, elimination of employee discounts in the cafeteria and a concern on the part of the employees about the quality of patient care. Job security was mentioned as an issue with some employees who gave examples of individuals who had been perceived to have been fired with little or no cause.

Salary. The two main concerns expressed by employees were low staffing and poor pay. Related to the matter of poor pay was the effect of the maxing out policy and the lack of pay raises.

Relationship with Peers. Mention has already been made of the evidence of positive relationships among employees. Having positive relationships with fellow employees was cited as one of the most positive aspects of working here.

Communication. While Herzberg does not list communication among his factors, it is pervasive enough and relates closely enough to many issues discovered in this survey that it bears analysis.

In characterizing differences in the old hospital and the new one, those who had been at the old hospital always mentioned that communication was better there. Many examples were cited of poor communication between departments. Survey participants indicated desires for departmental meetings but realized the heavy work load might prohibit such meetings.

Most employees had the impression that the only personal communication they receive from management is of a negative nature. Positive feedback is almost non-existent.

It should be mentioned that employees believed the hospital newsletter to be a valuable source of information for them. They also had praise for the Personnel Department in giving them the information they needed.

Inherent in the communication area was a plea made by the nursing group that the hospital administration find out what are the problems in the nursing area causing so many nurses to leave.

There was a general perception among employees that management does not share information openly with them.

The Management Group

The following summary represents issues discussed by the management group. Those issues which were concerns in all groups will not be duplicated in the following summary. It should be emphasized that the managers were more intense concerning the issues they raised than were the other employees.

These managers felt very strongly about their mission being to provide good patient care. They were concerned about the hospital's ability to care for the worst scenario patient.

On the subject of management, this group was frustrated with the flood of memos from all directions and in many cases with no clear line of authority. They expressed a concern with the rapid turnover among management. They felt that managers are open and honest, but there is usually no feedback from the

administration. Performance appraisals were mentioned as a concern because of the prevailing notion that feedback comes only once per year, at the performance appraisal.

This group mentioned that when physicians complain to the administration about an employee the administration will automatically support the physician and reprimand the employee. The issues of residents not being supervised and their attitudes of "owning the place" were raised. This management group was also concerned about the continuing problems caused by the decentralized critical care areas.

On the positive side, the managers enjoyed their work because of the uniqueness of being a teaching hospital. The experience gained here is very helpful if one wants to move on.

Following is a list of suggestions/concerns which were mentioned which do not generally fit into the topics already discussed.

The personnel staff is too small, preventing
adequate recruitment.

Noise level should be lowered in all departments.

Day care centers are needed for employees.

Would like to have pay checks directly deposited.

Fringe benefits are low.

The harder one works, the higher the expectations.

The lack of support of the hospital's marketing
program is a result of "our not dealing with
the patients we have."

Tuition reimbursement is slow in coming.

There is a need for continuing orientation. Someone should address legal issues during the orientation. Also, someone who has patient care contact should talk about patient care.

There are often patients who don't know who their doctor is.

There is a problem with employee safety in the psychiatric area.

Charge nurses receive no extra pay and have no authority.

Leadership is lacking in many areas causing increased stress levels.

At other area hospitals, time beyond eight hours is considered overtime; here you must work a forty-hour week to qualify. (Nursing)

Five-year service pins should be replaced with yearly pins.

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